

BALTIMORE COUNTY LANDMARKS PRESERVATION COMMISSION

http://www.baltimorecountymd.gov/Agencies/planning/historic_preservation/index.html

histpres@baltimorecountymd.gov

105 West Chesapeake Avenue, Suite 101, Towson, Maryland 21204 (410) 887-3495

**APPLICATION FOR PROPERTY TAX CREDIT FOR HISTORIC RESTORATION AND
REHABILITATION - RESIDENTIAL PROPERTIES**

PART I - APPLICATION FOR CERTIFICATE OF ELIGIBILITY

GENERAL PROPERTY INFORMATION:

Property Address: _____ City: _____ Zip Code: _____

Property Owner Name & Address: _____

Telephone # (Please indicate work, home or cell): _____

E-Mail Address: _____

Property Tax ID#: _____ Tax Map #: _____ Tax Parcel #: _____

CURRENT USE OF PROPERTY (PLEASE CHECK ONLY ONE):

- ☐ Owner Occupied Residential
- ☐ Apartment
- ☐ Vacant
- ☐ Other _____

HISTORIC ELIGIBILITY:

Property is an eligible historic resource by being listed in (please check all that apply)

- ☐ **Baltimore County Final Landmarks List (Cite name and landmark #)**

- ☐ **National Register of Historic Places (Cite name)**

☐ **Contributing structure in National Register Historic District (Cite name of property & district)**

☐ **Contributing structure in Baltimore County Historic District (Cite name of property & district)**

The undersigned owner(s), or authorized representative, of the property identified above attest to the information provided is correct, and hereby apply for certification by the Baltimore County Department of Planning that the property qualifies to participate in the Baltimore County Rehabilitation Tax Credit program. Furthermore, the owner(s) hereby agree that, if the property identified does not already have a delineated historic environmental setting (or is not in a National Register or Baltimore County Historic District), the Landmarks Preservation Commission shall delineate the setting in accordance with County law.

or authorized representative

Owner

Co-owner (if applicable)

Date

Date

Certificate of Eligibility:

The Baltimore County Department of Planning hereby determines, in accordance with Section 11-2-201 (f)(2), of the Baltimore County Code, 2003, that the property identified in this application is a historic resource eligible under item 7 _____ to apply for the Baltimore County Property Tax Credit for Historic Restoration and Rehabilitations.

of Planning or authorized designee

Director

Date

Submit this form to:

**Baltimore County Department of Planning
Landmarks Preservation Commission
Jefferson Building
105 West Chesapeake Avenue, Suite 101
Towson, Maryland 21204**

For questions, please contact Preservation Services, 410-887-3495
hstpres@baltimorecountymd.gov

APPLICATION FOR PROPERTY TAX CREDIT FOR HISTORIC RESTORATION AND REHABILITATION - RESIDENTIAL PROPERTIES

PART II - APPLICATION FOR CERTIFICATE OF APPROPRIATENESS (Description of Proposed Work)

PROPERTY INFORMATION:

Property Address: _____ City: _____ Zip Code: _____

Property Owner Name & Address: _____

Telephone # (Please indicate work, home or cell): _____

E-Mail Address: _____

All Part II Applications must include the following information. Incomplete applications will not be processed other than to inform the applicant of the deficiencies.

- Copy of Part I Certification signed by the Baltimore County Department of Planning
- Basic historic information about the property (construction date of building(s), maps, historic photographs & aerials, if available etc.)
- Site plan, including photo locations
- Photographs of the exterior of all sides of the existing structure(s) and of all interior rooms and spaces to be affected by the rehabilitation/restoration work
- Photographs of the buildings on the immediately abutting properties
- Elevation drawings, where exterior rehabilitation work is proposed
- Cross-sections and/or detail drawings for interior work
- A summary description form for each work item with detailed description of the conditions to be altered or corrected by the proposed work, including materials to be used and indication of whether the work constitutes repair or replacement of architectural features
- Estimated total work of the rehabilitation (excluding: architectural design consultation fees, site work, landscaping and new construction) \$_____

I, the owner or authorized representative of the real property located at _____, (tax map_____, tax parcel _____) hereby attest that, to the best of my knowledge, the information provided in this Part II application is correct.

Owner/representative's name (Please Print)

Authorized Signature

Date

Reviewed by Preservation Services: _____

Submit this form and all related documentation to:

Baltimore County Department of Planning, Landmarks Preservation Commission
Jefferson Building, 105 West Chesapeake Avenue, Suite 101
Towson, Maryland 21204

For questions, please contact Preservation Services, 410-887-3495 hispres@baltimorecountymd.gov

Part II Application - Summary descriptions of the proposed rehabilitation work (excluding site work and construction of additions or new structures)

Work Item #: _____ Photo(s) #: _____ Drawing(s) #: _____

Architectural feature, approximate date and existing condition(s):

Description of work and effect on existing condition(s):

Work Item #: _____ Photo(s) #: _____ Drawing(s) #: _____

Architectural feature, approximate date and existing condition(s):

Description of work and effect on existing condition(s):

Reviewed by Preservation Services: _____